



## TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number	09/928,679
Filing Date	August 13, 2001
First Named Inventor	Iliiff, et al.
Art Unit	3764
Examiner Name	M. A. Brown

6 Attorney Docket Number 20869

### ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please Identify below):
<b>Remarks</b> <hr/>		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Name	Patricia A. Shatynski	Registration No. (Attorney/Agent)	43,109
Signature			Date
			3/11/05

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on this date: 3/11/2005

Typed or printed name	Luisa Townes	
Signature		Date
		3/11/05



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Applicants:** S.A. Iliff, *et al.*

**Serial No.:** 09/928,679

**Case No.:** 20869

**Filed:** August 13, 2001

**Art Unit:**  
3764

**For:** SAFETY SHIELD

**Examiner:**  
M. A. Brown

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**

Sir:

In response to the Office Action mailed February 24, 2005, Applicant respectfully requests reconsideration in view of the following amendments and remarks.

**Amendments to the Claims** begin on page 2 of this paper

**Remarks/Arguments** begin on page 5 of this paper.

**CERTIFICATE OF MAILING**

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